Education Activities

Α	Education Support Activities	Fill in the numbers requested, and, where possible, indicate results you have						
			e blank those rows v					
		activities in	the row labeled OTI	HER, or	write them on an additional page.			
					What results have you seen?			
				otal	For example:			
	For each of the following activities you	Total	served Ame	riCorps	*Student class participation increased	Special		
	did under AmeriCorps, please complete	or di	rectly Mei	mbers	*Number of students wanting tutors increased	characteristics		
	the columns to the right.	bene	efiting inv	olved	*Computer center now fully staffed with volunteers	of clients or		
					*Students more interested in environment	beneficiaries		
					*Results of assessment used to modify class focus			
1	Recruited peer (student) tutors	# of tutors:						
2	Trained peer (student) tutors	# of tutors:						
3	Recruited volunteers for tutoring or other educational purposes	# of volunteers:						
4	Trained, placed, and/or followed-up volunteers who were providing services	# of volunteers:						
5	Developed curriculum or curriculum materials (Please specify subject areas)	# of students instructed:						
6	Performed case management (e.g., followed up student performance in different classes; worked with students' teachers to integrate instruction)	# of students:						
7	Assembled book collections, maintained libraries	# of students:						
8	Other Student or Instructional Support (Please specify)	# of units: (specify unit)						

Education Activities

В	Education Services	Fill in the numbers requested, and, where possible, indicate results you have seen. Leave blank those rows which are not applicable. Feel free to add activities in the row labeled OTHER, or write them on an additional page.							
	For each of the following activities you did under AmeriCorps, please complete the columns to the right	Total served or o benefiting	,	Total AmeriCorps Members providing services	What results have you seen? For example: * <number> Grades increased *<number> Homework turned in *<number> Parents passed GED tests</number></number></number>	Special characteristics of clients or beneficiaries			
1	Provided child care								
2	Taught students in Head Start or kindergarten								
3	Taught students in grades 1-12 What grade levels? (Please use box)								
4	Tutored students in grades 1-12 What grade levels? (Please use box)								
5	Mentored or counseled concerning school success or achievement								
6	Provided in-class enrichment (such as speakers, presentations)								
7	Provided out-of-class enrichment (such as field trips)								
8	Conducted home visits for instruction or follow-up of educational activities								
9	Organized or conducted service learning & community education activities	# of students:							
10	Worked with parents or families on parenting skills development	# of parents:							
11	Taught adults GED or basic skills development	# of adults:							
12	Other activities (Please specify)	# of units: (specify unit)							

Human Needs Activities

A	Human Needs Service Support Activities	Fill in the numbers requested, and, where possible, indicate results you have seen. Leave blank those rows which are not applicable. Feel free to add activities in the row labeled OTHER, or write them on an additional page.					
	For each of the following activities you did under AmeriCorps, please complete the columns to the right	Total served or directly benefiting	Total AmeriCorps Members providing services	What results have you seen? For example: * <number> Homeless parents found jobs *<number> Homeless HIV+ individuals fed *<number> Permanent shelter found *<number> Children allowed in school because immunized</number></number></number></number>	Special characteristics of clients or beneficiaries		
1	Adults or children were provided transportation in support of other human service activities						
2	Families were provided child care in support of other human service activities	# families:					
3	People were provided case management such as health appointments or follow up scheduling						
4	Volunteers recruited and coordinated for assistance in addressing human needs issues	# volunteers:					
5	People's specific support needs assessed or identified						
6	Informational materials developed (Please specify subject)						
7	Informational materials distributed (Please specify subject)	# who received:					
8	Organized or staffed a community event, fair, or benefit related to health or other human needs which people attended	# attending:					
9	Other Service Support Activities (Please specify)	# of units: (specify unit)					

Human Needs Activities

В	Human Needs Direct Services	Fill in the numbers requested, and, where possible, indicate results you have seen. Leave blank those rows which are not applicable. Feel free to add activities in the row labeled OTHER, or write them on an additional page.					
	For each of the following activities you did under AmeriCorps, please complete the columns to the right	Number of items	Total served or directly benefiting	Total AmeriCorps Members providing services	What results have you seen? For example: * <number> Individuals found jobs *<number> Homeless individuals found permanent homes.</number></number>	Special characteristics of clients or beneficiaries	
1	People received independent living assistance (such as chores for seniors, social support for disabled)						
2	People counseled concerning job development or placement						
3	People counseled related to health and family matters (mental or physical health, or other matters)						
4	Homeless given shelter or vouchers for shelter		# people:				
5	Homeless placed in housing (permanent or transitional to permanent)		# people:				
6	Homeless given goods to help them, such as distributed clothes and food (shelter support) Organized of packed 1000 of clothing for a 1000 pank of						
7	clothing distribution center; provided furniture or other	# items:	# people:				
8	New homeowners or potential home owners are provided housing services and loan development		# people:				
9	Individuals received access to health care, diagnosis, and/or follow-up, and/or screened for needed care						
10	Pregnant women received access to prenatal care, screening or actual health services, and/or taught about children's health or development; families with young children provided health care or screening						
11	Adults or children immunized		# adults: # children:				
12	Other Direct Services (Please specify)	# items: (specify unit)	# people: (specify type)				

Environment Activities

4	Environment Support &	Fill in the numbers requested, and, where possible, indicate results you					
	Emergency Response	have seen. Leave	blank those	e rows which	able. Feel free		
		to add activities in	the row la	beled OTHER	, or write then	n on an additional page.	
		Total buildings, tra wild land acrea		Estimated	Total	What results have you seen?	Special characteristics of work or its beneficiaries
	For each of the following activities you			number of	AmeriCorps	For example:	
	did under AmeriCorps, please complete			people	Members	* Improved water quality standards	
	the columns to the right			served or	providing	in mixed industrial & residential	
				directly	services	* Designed shelters to house 50	
				benefiting		homeless people	
1	Assessed need for public or community building repair needs (e.g., for repair of public facilities, lead abatement)	# assessed:					
2	Assessed housing or building repair needs (e.g., for housing, pollution prevention or containment, or risk management)	# assessed:					
3	Assessed park trail or wild land area	# assessed:					
	maintenance needs (e.g., need for repair of	# of miles:					
	trail erosion, safety enhancement)	# of acres:					
4	Helped clients identify requirements to meet health or pollution standards (e.g., water quality or air quality guidelines)		$\langle \rangle$				
5	Distributed information about risks or prevention to the public (Please specify type of risks)	# distributed:					
	Provided safety training on environmental hazards	# of trainings:					
6	(e.g., pesticide training)						
7	Designed or drew up plans for picnic areas, community buildings, housing or shelters	# planned:					
8	Provided emergency assistance to individuals in need						
g	Performed emergency response (e.g., fought fires, performed search and rescue)	# emergencies:					
10	Other responses (Please specify)	# of units: (specify unit)					

Environment Activities

B Neighborhood Environment Fill in the numbers requested, and, where possible, indicate results you				ou .		
				s which are not appl		
		to add activities in	n the row labeled	OTHER, or write the	em on an additio	pnal page.
				Estimated	Total	Special characteristics of work or its beneficiaries?
	For each of the following activities you	Total thing	s/units built	number of	AmeriCorps	
	did under AmeriCorps, please complete	,	housing units	people served	Members	
	the columns to the right		gs renovated,	or directly	providing	
		areas cleared # completed:	l, trees planted)	benefiting	services	
1	Constructed new homeless shelters or made old	·				
	shelters habitable	# in progress:				
2	Constructed low income housing or housing for	# completed:				
	disabled or elderly	# in progress:				
3	Rehabilitated/renovated low income housing or	# completed:				
	housing for disabled or elderly	# in progress:				
4	Rehabilitated, renovated, or repaired other	# completed:				
	community buildings	# in progress:				
5	Weatherized or winterized homes and/or other	# homes, apts, etc.:				
	buildings	# community buildings:				
6	Worked on business development activities or helped prepare redevelopment or business	# businesses attending:				
	development events	# communities:				
7	Cleaned up neighborhoods (indicate lbs or tons of	Lbs:				
	trash removed and/or number of neighborhoods	Tons:				
	cleared or in which graffiti removed)	# neighborhoods:				
8	Planted neighborhood gardens	# gardens:				
9	Planted trees in urban areas or rural towns (not wildlands)	Total trees planted:				
10	Recycled consumables or improved energy efficiency in neighborhood (Specify amount	Lbs. recycled:				
	recycled, or # of devices/fixtures)	# of items:				
11	Eliminated or abated environmental risk in buildings, bases, parks or other areas. (Please specify risk)	# of buildings:				
		# of areas:				
12	Other activities (Please specify)	# of units: (specify unit)				

Environment Activities

C	Natural Environment	Fill in the number	ers requested, and, w	here possible, indicat	e results you ha	ave
				are not applicable. Fe		
		activities in the	ow labeled OTHER,	or write them on an ad	lditional page.	
	For each of the following activities you	Number of units		Estimated	Total	Special characteristics of unit or work done
	did under AmeriCorps, please complete	(e.g., trees plante	d, dams repaired,	number of	AmeriCorps	
	the columns to the right	areas abated, fish	cultivated)	people served	Members	
				or directly	providing	
		# of acres:		benefiting	services	
1	Planted trees in wildlands or park lands					
	(Specify acres or trees)	# of trees:				
2	Eliminated environmental risks in wild or park lands (Specify risk)	# of acres:				
		# of miles:				
3	Repaired dams or did other flood control activities (Specify type of work)	# of dams or items:				
		Miles of river:				
4	Restored or conserved rivers, river banks,					
	beaches, and fish habitat	Acres of habitat:				
5	Restored or conserved other public lands and fowl or fauna habitat (Specify type of habitat)	Acres of habitat or land:				
6	Maintained or cleaned up trail & other public park areas or roads	Miles of trail or road:				
7	Sampled, mapped and/or monitored natural resources (Specify resources and types of service)	# of activities or efforts:				
8	Provided other technical services (e.g., computer simulation) (Specify type of service)	# of service activities:				
9	Trained others to prevent or better address environmental problems (Specify type of training)	# of trainings:				
		Hafrington form 1				
10	Other activities (Please specify)	# of units: (specify unit)				

Public Safety

	Public Safety	have seen. Leave blank those	ill in the numbers requested, and, where possible, indicate results you ave seen. Leave blank those rows which are not applicable. Feel free add activities in the row labeled OTHER, or add them on an additional page.					
	For each of the following activities you did under AmeriCorps, please complete the columns to the right	Programs or groups affected	Total served or directly benefiting	Total AmeriCorps Members providing service	What results have you seen? For example: *Held first peaceful community event * <number> Gang members now working as peer mediators</number>	Special characteristics of clients or beneficiaries		
1	Developed networks among ethnic or other groups previously not relating well	# community groups:	# people:					
2	Conducted neighborhood watch or violence prevention patrols, child or	# patrol groups: # escorts:	# people escorted:					
3	Started or continued community policing or police relations programs	# escorts. # programs:	#individuals:					
4	Conducted or trained students in conflict mediation/ resolution programs in schools	# programs:	# involved:					
5	Conducted or trained students, adults, or families in conflict mediation/ resolution out of school	# programs:	# involved:					
6	Organized and/or conducted after school sports & violence avoidance activities		# who participated:					
7	Counseled individuals about substance abuse prevention or related issues		# counseled:					
8	Provided information about risks, safety measures, or victimization prevention to public, or answered hotline calls (Specify type of risks)		# who received info:					
9	Conducted anti-victimization counseling, workshops in violence prevention, or help in negotiating the justice system		# individuals counseled or trained:					
10	Conducted child abuse prevention awareness training		# individuals trained:					
11	Conducted activities related to juvenile or adult offenders or ex-offenders (e.g., career development for youth on probation)		# juveniles: # adults:					
12	Other activities (Please specify)	# of units (please specify)						

Member Development

	Member Development	Fill in the numbers requested and comment on any results you have seen. Leave blank those rows that are not applicable. Feel free to add accomplishments in the row labeled OTHER, or on an additional page.					
	For each of the following activities you did under AmeriCorps, please complete the columns to the right	Total AmeriCorps Members trained	What results have you seen? For example: *Members now employed by social service agencies				
1	Trained Members in life skills such as organizational skills, problem solving, working in teams, leadership skills, conflict resolution. (Please describe skills in which members were trained.)						
2	Trained Members in technical skills related to carrying out their assignments						
3	Provided Members academic training toward getting their GED or high school diploma						
4	Provided Members career development training or counseling						
5	Trained Members in CPR, first aid, emergency response						
6	Trained Members in citizenship and civic responsibility						
7	Helped prepare Members for their post-AmeriCorps job search						
8	Other Member Development activities (Please specify)						